

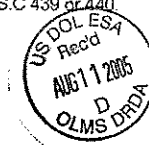
FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.



1. File Number U - 034 498	2. Fiscal Year Covered From: 01/01/04 Through: 12/31/04
3. Name and address of person filing. Name LINDA M. RAPP P.O. Box, Bldg., Room No., if any Street 617-18th AVE SW City Rochester State MN ZIP Code + 4 55902	4. Name, file number, and address of labor organization. Name Painters AFL-CIO Labor File # 034-498 P.O. E LU # 681 Street 11 Fourth Street S.E. City Rochester, MN 55904 State ZIP Code + 4
5. Position in labor organization Secretary - Financial Secretary	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Painters Local #681 Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 11 Fourth St SE City Rochester State MN ZIP Code + 4 55904	7. a. Nature of Interest, Transaction, or Income. none 7. b. Amount. none

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed Linda Rapp	On 7-18-05 Date	507)286-1139 Telephone Number

